Table 3.1 Inpatient Hospital User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1997 (1 of 4)

		Medicare		Supplemental I	Health Insurance		
Beneficiary		Fee-for-Service		Individually-Purchased	Employer-Sponsored	Both Types of	Medicare
Characteristic	Total	Only	Medicaid	Private Insurance	Private Insurance	Private Insurance	HMO ²
			Percentage of	of Beneficiaries with at Least C	ne Inpatient Hospital Stay		
All Beneficiaries	19.16	15.28	26.50	20.77	17.83	18.47	15.53
	0.37	1.14	1.12	0.72	0.68	1.87	0.87
Medicare Status ³							
Aged							
65 - 74 years	14.88	10.13	22.56	18.06	13.18	15.32	11.98
,	0.56	1.49	1.89	1.11	0.81	3.09	1.07
75 - 84 years	22.59	20.04	30.03	21.75	23.43	21.87	19.42
·	0.64	2.42	2.45	1.12	1.49	3.09	1.65
85 years and older	28.87	24.61	36.07	29.93	28.43	13.94	26.64
	1.34	4.87	3.15	2.56	2.46	4.98	3.28
Disabled							
Under 45 years	19.72	12.59	23.82	16.60	14.11	36.32	22.49
·	1.49	3.34	2.49	6.50	3.40	22.05	11.08
45 - 64 years	22.73	19.92	28.41	15.09	22.27	38.42	15.93
	1.68	3.09	3.12	4.53	3.13	19.82	5.02
Gender							
Male	20.06	17.09	28.73	21.98	18.20	23.89	16.55
	0.60	1.61	1.84	1.32	0.88	3.20	1.21
Female	18.45	12.81	25.22	19.95	17.52	14.03	14.69
	0.46	1.71	1.48	1.00	0.92	2.22	1.20
iving Arrangement							
Alone	21.02	19.02	27.92	20.54	20.73	14.68	16.86
	0.70	2.21	1.93	1.19	1.19	2.92	1.70
With spouse	17.64	14.49	29.79	19.54	16.74	19.38	14.14
	0.51	1.93	2.60	1.10	0.80	2.74	1.19
With children	21.95	12.24	22.70	26.81	19.99	25.78	23.96
	1.16	2.38	2.09	2.98	2.78	9.72	4.01
With others	19.35	11.69	23.72	26.63	14.50	26.26	13.52
	1.29	2.16	2.18	3.57	3.01	13.05	3.55

Table 3.1 Inpatient Hospital User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1997 (2 of 4)

		Medicare		Supplemental I	Health Insurance		
Beneficiary		Fee-for-Service		Individually-Purchased	Employer-Sponsored	Both Types of	Medicare
Characteristic	Total	Only	Medicaid	Private Insurance	Private Insurance	Private Insurance	HMO ²
			Percentage of	of Beneficiaries with at Least C	ne Inpatient Hospital Stay		
All Beneficiaries	19.16	15.28	26.50	20.77	17.83	18.47	15.53
	0.37	1.14	1.12	0.72	0.68	1.87	0.87
Race/Ethnicity							
White non-Hispanic	19.12	14.52	29.13	20.78	17.87	17.86	16.13
•	0.40	1.32	1.43	0.73	0.73	1.87	0.98
Black non-Hispanic	21.50	19.24	26.24	22.47	17.11	17.12	18.64
·	1.24	2.57	1.96	5.57	2.53	8.36	3.03
Hispanic	17.71	14.91	23.94	16.97	18.33	39.95	5.91
	1.35	3.91	2.77	4.41	3.47	19.34	1.73
Other	15.65	10.98	14.02	25.86	14.31	23.08	16.10
	2.26	5.98	3.98	11.37	4.93	22.12	5.55
ncome							
Less than \$2,500	24.44	10.60	31.41	23.55	38.38	15.46	15.56
2000 παιτ φ2,000	4.10	5.56	9.34	8.25	12.46	14.70	9.45
\$2,500 - \$4,999	19.21	12.71	23.14	28.04	9.72	19.64	2.44
Ψ2,000 Ψ1,000	2.55	5.23	4.99	8.42	6.19	25.34	2.51
\$5,000 - \$7,499	20.51	9.75	23.93	19.93	17.14	0.00	10.78
ψο,οσο ψ.,.οσ	1.20	2.25	1.86	3.24	4.80	0.00	3.88
\$7,500 - \$9,999	22.30	13.73	29.58	23.97	19.98	34.19	16.42
* , *-,	1.17	2.48	2.18	2.50	3.27	18.48	3.01
\$10,000 - \$14,999	22.04	19.21	28.53	22.59	22.84	24.81	18.22
	0.96	2.59	3.17	1.63	1.89	6.54	2.15
\$15,000 - \$19,999	19.12	14.70	22.06	19.33	19.81	19.07	19.47
	0.98	3.04	6.54	2.28	1.75	5.18	2.21
\$20,000 - \$24,999	18.38	21.20	63.65	16.17	19.76	15.46	16.25
	1.12	5.57	14.94	1.99	1.74	4.61	2.83
\$25,000 - \$29,999	17.54	14.85	28.47	21.38	15.99	19.74	15.36
	1.56	5.76	18.04	2.85	1.90	7.90	3.77
\$30,000 or more	16.34	14.32	38.27	20.68	15.00	17.32	12.76
	0.75	3.73	12.38	1.64	1.05	2.66	1.51

Table 3.1 Inpatient Hospital User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1997 (3 of 4)

		Medicare		Supplemental I	Health Insurance		
Beneficiary	1	Fee-for-Service		Individually-Purchased	Employer-Sponsored	Both Types of	Medicare
Characteristic	Total	Only	Medicaid	Private Insurance	Private Insurance	Private Insurance	HMO ²
'			Percentage of	Beneficiaries with at Least C	ne Inpatient Hospital Stay		
All Beneficiaries	19.16	15.28	26.50	20.77	17.83	18.47	15.53
	0.37	1.14	1.12	0.72	0.68	1.87	0.87
Health Status							
Excellent	8.39	8.01	11.70	10.21	7.93	9.02	5.58
	0.66	2.53	2.82	1.53	1.03	3.59	1.16
Very good	12.08	11.40	15.32	12.70	12.18	12.53	9.69
	0.61	2.45	2.08	1.30	1.12	3.13	1.33
Good	18.85	14.80	22.76	19.85	17.37	17.42	19.88
	0.57	2.33	1.97	1.40	1.18	3.03	1.84
Fair	27.72	15.73	29.77	31.73	28.74	36.59	26.01
	1.06	2.14	2.22	2.37	2.08	7.53	2.67
Poor	42.35	26.89	41.99	55.40	43.28	55.56	33.85
	1.68	4.24	3.00	3.23	3.34	9.90	5.31
unctional Limitation							
None	12.49	11.38	17.47	13.87	11.63	12.06	10.47
	0.42	1.23	1.46	0.95	0.67	1.98	0.98
IADL only ⁴	25.07	17.12	26.01	27.05	26.14	32.91	22.95
	0.80	2.38	1.81	1.85	1.44	5.10	1.98
One to two ADLs ⁵	28.49	18.32	30.57	31.86	29.81	27.81	27.45
	1.43	3.28	2.54	2.71	3.04	7.42	3.57
Three to five ADLs	43.24	29.87	46.05	48.62	45.07	42.04	33.97
	1.88	5.27	3.64	3.75	3.76	12.06	4.72

Table 3.1 Inpatient Hospital User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1997 (4 of 4)

		Medicare	Supplemental Health Insurance							
Beneficiary		Fee-for-Service		Individually-Purchased	Employer-Sponsored	Both Types of	Medicare			
Characteristic	Total	Only	Medicaid	Private Insurance	Private Insurance	Private Insurance	HMO ²			
			Percentage of Beneficiaries with at Least One Inpatient Hospital Stay							
All Beneficiaries	19.16	15.28	26.50	20.77	17.83	18.47	15.53			
	0.37	1.14	1.12	0.72	0.68	1.87	0.87			
Metropolitan Area Resident										
Yes	18.99	15.33	25.73	21.15	17.86	19.14	15.74			
	0.47	1.45	1.33	0.93	0.77	2.31	0.90			
No	19.77	14.77	28.58	20.14	18.07	16.71	11.99			
	0.51	1.66	2.00	1.25	1.00	3.17	3.33			

Source: Medicare Current Beneficiary Survey, CY 1997 Cost and Use Public Use File.

¹ The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.

² HMO stands for Health Maintenance Organization.

³ Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of aged and disabled.

⁴ IADL stands for Instrumental Activity of Daily Living.

⁵ ADL stands for Activity of Daily Living.

Table 3.2 Outpatient Hospital User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1997 (1 of 4)

		Medicare		Supplemental I	Health Insurance		
Beneficiary		Fee-for-Service		Individually-Purchased	Employer-Sponsored	Both Types of	Medicare
Characteristic	Total	Only	Medicaid	Private Insurance	Private Insurance	Private Insurance	HMO ²
			Percentage of E	Beneficiaries with at Least One	Outpatient Hospital Visit		
All Beneficiaries	67.82	62.29	74.92	71.21	66.64	73.69	60.63
	0.56	1.52	1.19	0.98	0.93	2.24	1.30
Medicare Status ³ Aged							
65 - 74 years	64.52	59.73	73.93	70.66	61.97	72.37	56.76
	0.86	2.76	2.07	1.73	1.36	3.24	1.88
75 - 84 years	71.49	62.77	76.33	72.76	72.85	76.37	65.15
	0.88	2.87	2.13	1.37	1.32	3.79	1.94
85 years and older	70.53	67.69	76.61	71.61	69.79	67.90	65.36
	1.21	4.62	2.88	2.17	2.95	6.38	3.85
Disabled							
Under 45 years	66.97	57.02	71.94	49.73	67.53	75.07	54.51
·	1.75	4.48	2.01	10.70	4.62	21.58	13.21
45 - 64 years	72.24	67.63	77.27	57.64	74.03	77.93	71.44
	1.72	3.02	2.80	8.49	3.75	16.91	5.41
ender							
Male	64.83	63.76	70.60	68.79	62.72	68.04	59.69
	0.85	1.75	2.04	1.76	1.40	3.17	1.96
Female	70.22	60.28	77.38	72.84	70.07	78.32	61.41
	0.61	2.89	1.41	1.12	1.20	2.79	1.67
iving Arrangement							
Alone	69.83	63.47	78.49	71.90	68.45	78.99	59.55
	0.92	2.91	1.65	1.30	1.66	3.93	2.28
With spouse	66.80	63.65	71.39	71.11	66.28	71.91	60.24
	0.75	2.44	2.81	1.52	1.16	2.74	1.85
With children	67.51	60.01	73.87	71.04	62.97	62.86	61.59
	1.62	3.83	3.42	3.41	3.85	12.71	5.21
With others	67.74	56.59	72.87	67.95	66.78	72.23	67.61
	1.82	4.36	2.64	4.45	4.23	12.34	4.59

Table 3.2 Outpatient Hospital User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1997 (2 of 4)

		Medicare		Supplemental I	Health Insurance		
Beneficiary		Fee-for-Service		Individually-Purchased	Employer-Sponsored	Both Types of	Medicare
Characteristic	Total	Only	Medicaid Private Insurance Private Insurance	Private Insurance	Private Insurance	HMO ²	
'			Percentage of E	Beneficiaries with at Least One	e Outpatient Hospital Visit		
All Beneficiaries	67.82	62.29	74.92	71.21	66.64	73.69	60.63
	0.56	1.52	1.19	0.98	0.93	2.24	1.30
Race/Ethnicity							
White non-Hispanic	68.38	63.58	78.82	71.30	66.99	74.79	61.07
	0.61	1.92	1.68	0.95	0.95	2.26	1.39
Black non-Hispanic	69.36	61.69	76.45	64.10	68.01	59.86	67.91
	1.54	3.42	2.11	5.23	4.21	13.28	3.80
Hispanic	62.33	55.67	67.88	72.77	60.05	50.05	54.41
	1.85	5.36	2.90	6.18	5.12	20.95	5.11
Other	59.54	63.61	60.73	74.66	52.58	100.00	48.95
	4.08	10.37	6.04	9.00	8.36	0.00	8.32
ncome							
Less than \$2,500	74.76	68.90	63.76	67.43	97.51	100.00	74.24
	3.86	9.29	9.90	9.43	2.54	0.00	10.96
\$2,500 - \$4,999	59.56	48.54	68.29	62.29	47.27	67.76	34.34
	3.75	8.34	5.43	8.85	12.71	38.96	12.48
\$5,000 - \$7,499	68.39	45.54	75.64	67.38	61.00	0.00	48.60
	1.49	4.54	1.64	3.74	6.39	0.00	6.14
\$7,500 - \$9,999	66.91	61.83	75.50	67.32	61.18	76.26	58.06
	1.37	3.25	1.99	2.89	4.34	17.11	3.96
\$10,000 - \$14,999	67.26	62.35	74.50	71.64	65.35	81.66	60.88
	1.35	2.86	3.30	1.90	2.53	5.70	2.56
\$15,000 - \$19,999	70.23	73.50	80.73	73.94	69.26	75.29	60.05
	1.32	3.94	5.79	2.46	2.39	6.34	3.00
\$20,000 - \$24,999	69.47	76.04	96.70	72.16	68.47	71.94	62.76
	1.52	5.45	3.23	2.44	2.46	6.03	4.35
\$25,000 - \$29,999	69.95	70.35	72.01	72.06	68.70	73.42	68.76
	2.02	9.39	16.88	4.18	2.63	8.39	4.06
\$30,000 or more	66.32	58.24	72.97	71.32	65.63	72.25	60.21
	0.93	4.96	10.46	2.14	1.35	3.44	2.38

Table 3.2 Outpatient Hospital User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1997 (3 of 4)

		Medicare		Supplemental I	Health Insurance		
Beneficiary		Fee-for-Service		Individually-Purchased	Employer-Sponsored	Both Types of	Medicare
Characteristic	Total	Only	Medicaid	Private Insurance	Private Insurance	Private Insurance	HMO ²
			Percentage of Be	eneficiaries with at Least One	Outpatient Hospital Visit		
All Beneficiaries	67.82	62.29	74.92	71.21	66.64	73.69	60.63
	0.56	1.52	1.19	0.98	0.93	2.24	1.30
Health Status							
Excellent	57.38	46.14	57.65	61.37	56.85	74.62	53.73
	1.57	4.84	5.16	2.49	2.40	5.62	3.03
Very good	63.06	56.47	65.52	66.07	62.41	73.33	58.56
	1.04	4.19	3.61	1.84	1.75	3.72	2.44
Good	68.70	63.84	73.98	73.27	68.39	69.84	60.35
	0.89	3.42	2.26	1.56	1.62	4.19	2.17
Fair	74.99	65.77	77.83	80.11	74.26	81.83	71.32
	0.83	2.50	1.86	1.58	2.04	5.45	2.70
Poor	82.01	74.59	86.83	84.16	83.10	77.03	70.98
	1.18	4.03	2.02	2.50	3.06	11.32	6.04
unctional Limitation							
None	63.02	59.53	68.53	66.78	62.48	69.57	55.91
	0.78	2.22	1.87	1.48	1.10	2.76	1.69
IADL only ⁴	72.75	63.17	74.18	78.95	71.70	82.73	68.60
	0.89	3.27	1.99	1.81	1.93	4.88	2.39
One to two ADLs ⁵	75.71	65.08	84.24	76.51	74.82	84.11	72.16
	1.20	4.32	2.45	2.25	2.59	5.39	3.01
Three to five ADLs	80.68	72.20	81.95	81.50	86.04	79.16	73.28
	1.69	5.04	2.72	2.73	2.77	9.06	5.08

Table 3.2 Outpatient Hospital User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1997 (4 of 4)

		Medicare		Supplemental I	Health Insurance					
Beneficiary		Fee-for-Service		Individually-Purchased	Employer-Sponsored	Both Types of	Medicare HMO ²			
Characteristic	Total	Only	Medicaid	Private Insurance	Private Insurance	Private Insurance				
			Percentage of Beneficiaries with at Least One Outpatient Hospital Visit							
All Beneficiaries	67.82	62.29	74.92	71.21	66.64	73.69	60.63			
	0.56	1.52	1.19	0.98	0.93	2.24	1.30			
letropolitan Area Resident										
Yes	65.58	58.70	73.31	68.45	64.83	71.58	60.56			
	0.71	2.11	1.32	1.17	1.16	2.75	1.29			
No	74.73	69.67	79.49	75.93	73.79	79.23	61.87			
	1.02	2.03	2.09	1.84	1.37	3.45	8.26			

Source: Medicare Current Beneficiary Survey, CY 1997 Cost and Use Public Use File.

- 2 HMO stands for Health Maintenance Organization.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of aged and disabled.
- 4 IADL stands for Instrumental Activity of Daily Living.
- 5 ADL stands for Activity of Daily Living.

¹ The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.

Table 3.3 Physician/Supplier Services User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1997 (1 of 4)

		Medicare		Supplemental He	ealth Insurance		
Beneficiary		Fee-for-Service		Individually-Purchased	Employer-Sponsored	Both Types of	Medicare
Characteristic	Total	Only	Medicaid	Private Insurance	Private Insurance	Private Insurance	HMO ²
			Percentage of Be	neficiaries with at Least One F	Physician/Supplier Service		
All Beneficiaries	94.44	84.58	93.20	96.52	96.17	98.09	94.07
	0.27	1.12	0.74	0.39	0.36	0.72	0.66
Medicare Status ³							
Aged							
65 - 74 years	93.46	79.91	93.63	95.35	94.94	97.38	93.68
	0.48	2.24	1.31	0.71	0.63	1.31	0.98
75 - 84 years	96.88	88.95	94.10	98.34	98.02	99.48	95.59
	0.32	2.07	1.34	0.32	0.47	0.53	0.91
85 years and older	96.23	90.96	96.26	97.30	98.38	96.91	92.63
	0.52	2.87	1.26	0.72	0.73	2.18	1.94
Disabled							
Under 45 years	86.86	77.54	88.96	91.00	92.14	100.00	82.55
	1.29	3.77	1.73	5.75	2.35	0.00	9.52
45 - 64 years	93.59	91.30	93.84	86.44	97.16	94.45	92.70
	1.01	1.89	1.79	6.79	1.00	6.32	3.86
Gender							
Male	92.54	83.29	89.71	95.18	94.84	97.69	92.21
	0.45	1.67	1.36	0.69	0.68	1.21	1.05
Female	95.97	86.35	95.19	97.42	97.34	98.42	95.61
	0.30	1.76	0.82	0.42	0.43	0.87	0.75
iving Arrangement							
Alone	94.97	82.99	94.85	97.38	97.18	99.12	94.11
	0.45	1.98	0.91	0.59	0.58	0.61	1.10
With spouse	94.75	85.04	93.12	96.25	95.86	97.60	94.44
	0.35	2.00	1.74	0.54	0.48	1.10	0.90
With children	93.89	88.74	93.00	95.82	96.01	100.00	93.32
	0.78	3.11	1.69	1.37	1.52	0.00	2.44
With others	90.86	83.15	90.24	95.17	95.37	95.95	91.42
	1.15	3.53	1.50	2.42	2.03	4.13	2.70

Table 3.3 Physician/Supplier Services User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1997 (2 of 4)

		Medicare		Supplemental Ho	ealth Insurance		
Beneficiary		Fee-for-Service		Individually-Purchased	Employer-Sponsored	Both Types of	Medicare
Characteristic	Total	Only	Medicaid	Private Insurance	Private Insurance	Private Insurance	HMO ²
		"	Percentage of Be	neficiaries with at Least One F	Physician/Supplier Service		
All Beneficiaries	94.44	84.58	93.20	96.52	96.17	98.09	94.07
	0.27	1.12	0.74	0.39	0.36	0.72	0.66
Race/Ethnicity							
White non-Hispanic	95.42	85.99	94.95	96.79	96.46	98.55	94.96
	0.28	1.30	0.85	0.41	0.37	0.62	0.66
Black non-Hispanic	90.36	82.08	90.92	90.02	94.50	95.91	94.76
	0.92	2.37	1.40	2.89	1.69	4.37	2.12
Hispanic	89.84	85.11	92.21	93.38	93.50	85.25	84.50
	1.55	3.60	2.46	3.67	2.50	13.61	4.15
Other	91.79	71.65	92.19	96.00	93.82	100.00	96.81
	1.80	10.26	3.29	4.02	4.40	0.00	2.35
ncome							
Less than \$2,500	95.58	96.08	94.08	90.67	100.00	100.00	100.00
	1.21	2.81	4.43	5.32	0.00	0.00	0.00
\$2,500 - \$4,999	87.69	77.87	86.78	94.72	91.87	100.00	89.96
., .,	2.18	6.75	3.51	3.84	8.01	0.00	8.38
\$5,000 - \$7,499	90.22	77.53	92.07	94.64	100.00	100.00	74.35
	1.08	3.98	1.13	1.78	0.00	0.00	5.67
\$7,500 - \$9,999	92.22	79.91	95.61	95.63	96.59	100.00	92.29
	0.80	2.43	0.94	1.29	1.35	0.00	2.35
\$10,000 - \$14,999	94.23	88.48	94.22	95.57	95.99	100.00	93.56
	0.64	2.09	1.85	0.98	1.01	0.00	1.44
\$15,000 - \$19,999	95.41	92.16	94.98	96.81	94.85	98.82	95.34
	0.73	3.19	5.12	1.12	1.00	1.20	1.82
\$20,000 - \$24,999	94.16	78.67	100.00	96.34	95.00	99.20	93.28
	0.85	6.93	0.00	1.21	1.25	0.84	1.92
\$25,000 - \$29,999	96.42	91.49	100.00	96.40	97.50	92.64	96.00
	0.81	6.25	0.00	1.63	1.00	4.51	1.66
\$30,000 or more	96.47	83.62	100.00	98.06	96.44	98.13	96.59
	0.42	3.98	0.00	0.50	0.61	1.12	0.93

Table 3.3 Physician/Supplier Services User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1997 (3 of 4)

		Medicare		Supplemental He	ealth Insurance		
Beneficiary		Fee-for-Service		Individually-Purchased	Employer-Sponsored	Both Types of	Medicare
Characteristic	Total	Only	Medicaid	Private Insurance	Private Insurance	Private Insurance	HMO ²
		'	Percentage of Ber	eficiaries with at Least One F	Physician/Supplier Service		
All Beneficiaries	94.44	84.58	93.20	96.52	96.17	98.09	94.07
	0.27	1.12	0.74	0.39	0.36	0.72	0.66
Health Status							
Excellent	90.96	75.70	89.88	94.68	91.89	98.92	89.11
	0.86	4.47	2.28	1.30	1.18	1.10	2.05
Very good	93.21	77.75	85.59	95.30	94.99	97.40	95.16
	0.55	2.91	2.25	0.83	0.79	1.50	1.06
Good	95.87	89.38	93.22	97.37	98.03	99.56	94.06
	0.44	1.96	1.36	0.65	0.43	0.42	1.25
Fair	95.48	85.41	95.21	98.10	97.88	94.65	97.33
	0.47	1.93	1.17	0.58	0.70	3.34	1.21
Poor	97.04	90.22	97.79	98.15	99.68	100.00	96.32
	0.60	2.90	0.94	1.11	0.32	0.00	2.28
Functional Limitation							
None	93.52	80.73	90.55	95.56	95.24	97.89	93.52
	0.44	2.06	1.51	0.59	0.52	0.97	0.87
IADL only ⁴	94.72	84.95	92.04	97.71	97.74	100.00	94.67
	0.50	2.36	1.29	0.65	0.59	0.00	1.55
One to two ADLs ⁵	96.61	91.35	97.22	98.41	97.94	97.25	95.20
	0.42	1.99	0.89	0.65	0.76	1.81	1.64
Three to five ADLs	97.98	95.27	98.02	98.84	98.95	95.54	97.17
	0.45	2.49	0.89	0.66	0.81	4.46	1.66

Table 3.3 Physician/Supplier Services User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1997 (4 of 4)

		Medicare		Supplemental Health Insurance				
Beneficiary	Total	Fee-for-Service		Individually-Purchased	Employer-Sponsored	Both Types of Private Insurance	Medicare	
Characteristic		Only	Medicaid	Private Insurance	Private Insurance		HMO ²	
			Percentage of Be	neficiaries with at Least One F	hysician/Supplier Service			
All Beneficiaries	94.44	84.58	93.20	96.52	96.17	98.09	94.07	
	0.27	1.12	0.74	0.39	0.36	0.72	0.66	
Metropolitan Area Resident								
Yes	94.35	82.20	93.36	96.94	95.96	97.84	94.12	
	0.29	1.62	0.79	0.47	0.43	0.94	0.66	
No	94.89	88.58	93.27	95.97	97.19	98.75	93.23	
	0.64	1.27	1.60	0.65	0.55	0.91	3.57	

Source: Medicare Current Beneficiary Survey, CY 1997 Cost and Use Public Use File.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 HMO stands for Health Maintenance Organization.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of aged and disabled.
- 4 IADL stands for Instrumental Activity of Daily Living.
- 5 ADL stands for Activity of Daily Living.

Table 3.4 Dental Services User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1997 (1 of 4)

		Medicare		Supplemental H	ealth Insurance		
Beneficiary		Fee-for-Service		Individually-Purchased	Employer-Sponsored	Both Types of	Medicare
Characteristic	Total	Only	Medicaid	Private Insurance	Private Insurance	Private Insurance	HMO ²
	'		Percentage	of Beneficiaries with at Leas	t One Dental Service		
All Beneficiaries	41.72	23.14	21.32	43.62	51.83	64.69	41.85
	0.71	1.45	1.12	1.10	1.18	2.73	1.34
Medicare Status ³							
Aged							
65 - 74 years	44.84	22.50	19.97	46.77	54.48	68.59	42.67
	1.06	2.17	2.21	1.48	1.59	4.09	1.81
75 - 84 years	43.44	25.78	13.99	43.36	52.01	59.99	45.19
	0.88	2.52	1.87	1.49	1.84	4.36	2.31
85 years and older	30.96	15.22	11.60	32.67	39.08	63.50	31.37
	1.43	3.72	2.37	2.51	2.87	6.69	4.09
Disabled							
Under 45 years	35.40	25.97	33.64	41.02	56.66	32.70	31.77
•	1.95	3.68	2.51	12.06	5.63	21.85	11.41
45 - 64 years	30.56	23.33	25.20	36.03	40.75	71.71	28.94
	1.57	2.86	2.56	7.80	3.56	15.66	5.99
Gender							
Male	39.85	22.66	21.91	43.30	48.11	64.88	37.80
	0.89	1.87	1.53	1.27	1.67	3.60	1.62
Female	43.21	23.80	20.99	43.83	55.09	64.53	45.18
	0.88	2.01	1.44	1.52	1.52	3.50	1.95
_iving Arrangement							
Alone	39.71	23.89	25.28	39.77	51.02	66.85	40.61
7 110110	1.11	2.49	1.89	2.07	1.97	3.94	2.47
With spouse	47.17	24.04	20.44	48.26	53.58	65.59	45.43
	0.82	2.51	2.33	1.13	1.36	3.31	1.82
With children	23.57	16.53	11.92	29.67	35.30	45.45	24.92
	1.48	4.03	2.08	3.53	3.59	12.07	4.14
With others	32.05	23.98	23.55	37.89	52.04	52.01	32.77
	1.88	4.02	2.08	4.34	4.94	14.46	4.74

Table 3.4 Dental Services User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1997 (2 of 4)

		Medicare		Supplemental H	ealth Insurance		
Beneficiary		Fee-for-Service		Individually-Purchased	Employer-Sponsored	Both Types of	Medicare
Characteristic	Total	Only	Medicaid	Private Insurance	Private Insurance	Private Insurance	HMO ²
		'	Percentage	of Beneficiaries with at Leas	t One Dental Service		
All Beneficiaries	41.72	23.14	21.32	43.62	51.83	64.69	41.85
	0.71	1.45	1.12	1.10	1.18	2.73	1.34
Race/Ethnicity							
White non-Hispanic	45.06	24.48	23.95	44.79	53.38	65.76	43.59
·	0.72	1.83	1.41	1.06	1.26	2.81	1.56
Black non-Hispanic	23.86	20.03	16.14	16.41	36.90	38.83	33.22
	1.25	2.95	1.86	3.51	3.71	12.72	3.78
Hispanic	29.03	22.75	18.39	33.14	40.65	67.21	39.24
	2.37	3.86	2.65	6.67	5.63	18.88	5.08
Other	27.56	13.12	26.53	27.79	42.03	65.80	20.37
	3.66	6.50	5.68	11.15	9.58	25.64	6.88
ncome							
Less than \$2,500	34.62	35.23	21.36	33.88	49.32	69.31	17.56
2000 παιι ψ2,000	4.21	10.72	7.61	8.41	9.89	28.96	9.48
\$2,500 - \$4,999	22.81	16.48	16.86	41.43	18.54	15.59	45.05
· , · ,	2.39	5.79	3.60	7.87	7.67	22.78	14.97
\$5,000 - \$7,499	19.97	11.91	19.63	19.12	35.67	34.95	23.18
	1.20	3.34	1.60	3.10	5.91	34.46	6.69
\$7,500 - \$9,999	23.38	17.08	22.20	29.08	25.16	31.67	24.93
	1.47	2.45	1.89	3.09	3.56	17.03	3.80
\$10,000 - \$14,999	31.80	20.88	23.06	32.06	38.59	64.99	31.15
	1.12	2.35	2.91	1.89	2.51	6.47	3.00
\$15,000 - \$19,999	38.82	28.09	31.00	37.76	41.64	53.60	38.84
	1.50	4.21	6.43	2.33	2.86	7.62	3.06
\$20,000 - \$24,999	42.71	12.70	29.24	41.49	49.26	56.36	38.50
	1.35	3.80	14.20	2.74	2.25	6.67	3.60
\$25,000 - \$29,999	47.69	36.76	22.46	49.66	51.04	57.21	38.39
	1.70	9.25	14.46	3.37	3.07	8.43	4.07
\$30,000 or more	63.01	44.75	42.06	62.78	64.63	74.40	59.93
	1.10	4.82	12.62	1.83	1.61	3.47	2.40

Table 3.4 Dental Services User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1997 (3 of 4)

		Medicare		Supplemental H	ealth Insurance		
Beneficiary		Fee-for-Service		Individually-Purchased	Employer-Sponsored	Both Types of	Medicare
Characteristic	Total	Only	Medicaid	Private Insurance	Private Insurance	Private Insurance	HMO ²
'			Percentage of	of Beneficiaries with at Leas	t One Dental Service		
All Beneficiaries	41.72	23.14	21.32	43.62	51.83	64.69	41.85
	0.71	1.45	1.12	1.10	1.18	2.73	1.34
Health Status							
Excellent	50.30	30.22	24.47	55.05	56.47	72.64	44.80
	1.63	4.66	4.57	2.59	2.24	6.03	2.92
Very good	48.07	25.44	21.96	47.53	57.72	66.42	46.12
	1.05	3.27	2.62	1.68	1.74	3.93	2.89
Good	42.36	25.20	23.84	41.66	52.73	59.42	42.82
	1.08	2.85	2.12	1.97	1.86	4.49	2.33
Fair	31.12	18.06	18.10	35.85	40.93	66.26	30.65
	1.22	2.76	2.15	2.69	2.72	6.57	3.13
Poor	27.84	18.75	21.36	29.38	37.16	59.19	28.86
	1.35	3.32	2.53	3.20	3.88	13.29	5.58
unctional Limitation							
None	46.57	24.55	22.93	47.70	55.20	65.75	44.54
	0.86	2.18	1.87	1.44	1.26	3.16	1.67
IADL only ⁴	37.16	27.10	21.77	39.14	48.14	62.25	36.47
	1.25	3.30	1.79	2.40	2.23	5.80	3.09
One to two ADLs ⁵	33.75	16.26	21.86	36.48	42.84	65.57	39.21
	1.38	2.91	2.59	3.03	2.68	7.00	3.58
Three to five ADLs	27.30	14.93	15.61	30.72	38.68	57.72	29.35
	1.55	3.50	2.58	3.16	4.28	10.78	5.06

Table 3.4 Dental Services User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1997 (4 of 4)

		Medicare		Supplemental H	ealth Insurance		
Beneficiary		Fee-for-Service		Individually-Purchased	Employer-Sponsored	Both Types of	Medicare
Characteristic	Total	Only	Medicaid	Private Insurance	Private Insurance	Private Insurance	HMO ²
			Percentage	of Beneficiaries with at Leas	t One Dental Service		
All Beneficiaries	41.72	23.14	21.32	43.62	51.83	64.69	41.85
	0.71	1.45	1.12	1.10	1.18	2.73	1.34
Metropolitan Area Resident							
Yes	43.68	25.07	22.97	45.84	53.17	66.87	42.27
	0.75	1.85	1.50	1.42	1.30	3.11	1.34
No	36.30	20.18	17.68	39.85	47.34	58.95	34.87
	1.63	2.41	1.35	1.94	2.39	5.96	6.07

Source: Medicare Current Beneficiary Survey, CY 1997 Cost and Use Public Use File.

¹ The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.

² HMO stands for Health Maintenance Organization.

³ Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of aged and disabled.

⁴ IADL stands for Instrumental Activity of Daily Living.

⁵ ADL stands for Activity of Daily Living.

Table 3.5 Prescription Medicine User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1997 (1 of 4)

		Medicare		Supplemental H	ealth Insurance		
Beneficiary		Fee-for-Service		Individually-Purchased	Employer-Sponsored	Both Types of	Medicare
Characteristic	Total	Only	Medicaid	Private Insurance	Private Insurance	Private Insurance	HMO ²
			Percentage of Ben	eficiaries with at Least One	Prescribed Medicine		
All Beneficiaries	87.91	77.65	89.46	89.36	88.56	93.92	87.91
	0.42	1.38	0.83	0.77	0.55	1.06	0.96
Medicare Status ³							
Aged							
65 - 74 years	85.73	72.19	91.30	87.15	85.63	92.54	86.00
	0.64	2.75	1.50	1.28	0.91	2.08	1.33
75 - 84 years	90.66	78.69	91.04	91.65	91.74	96.20	89.13
	0.53	2.72	1.56	0.91	0.78	1.53	1.47
85 years and older	90.66	81.90	90.97	91.69	91.95	91.03	90.41
	0.71	3.38	1.96	1.54	1.27	3.96	1.92
Disabled							
Under 45 years	80.68	67.58	81.81	86.32	92.38	100.00	100.00
	1.59	4.22	2.07	7.56	2.13	0.00	0.00
45 - 64 years	92.02	90.66	90.46	86.48	94.11	94.45	97.65
	1.00	2.01	1.82	6.71	1.74	6.32	1.41
Gender							
Male	84.90	77.12	84.11	85.75	85.56	93.36	87.01
	0.64	1.97	1.57	1.24	0.96	1.52	1.34
Female	90.33	78.36	92.52	91.81	91.18	94.38	88.65
	0.46	2.27	0.86	0.79	0.74	1.62	1.28
iving Arrangement							
Alone	88.76	76.96	92.67	88.77	90.29	92.28	88.43
	0.64	2.27	1.11	1.18	1.08	2.12	1.54
With spouse	87.78	78.24	88.28	89.29	87.73	94.21	88.37
	0.53	2.02	2.21	0.97	0.73	1.40	1.10
With children	88.74	80.05	90.52	91.60	92.13	100.00	80.76
	1.29	3.85	1.87	2.38	2.11	0.00	4.60
With others	84.65	75.06	83.80	90.30	86.26	95.95	89.24
	1.49	3.56	1.89	3.08	3.28	4.13	3.36

Table 3.5 Prescription Medicine User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1997 (2 of 4)

		Medicare		Supplemental H	ealth Insurance		
Beneficiary		Fee-for-Service		Individually-Purchased	Employer-Sponsored	Both Types of	Medicare
Characteristic	Total	Only	Medicaid	Private Insurance	Private Insurance	Private Insurance	HMO ²
			Percentage of Be	eneficiaries with at Least One	Prescribed Medicine		
All Beneficiaries	87.91	77.65	89.46	89.36	88.56	93.92	87.91
	0.42	1.38	0.83	0.77	0.55	1.06	0.96
Race/Ethnicity							
White non-Hispanic	88.61	79.47	91.11	89.54	88.93	94.40	87.97
	0.40	1.65	0.96	0.77	0.55	1.02	1.03
Black non-Hispanic	84.48	73.03	86.96	91.25	85.95	87.71	89.04
	1.14	2.90	1.85	2.83	2.70	9.29	2.93
Hispanic	86.01	78.44	91.48	80.88	83.38	85.25	86.85
	2.51	6.46	2.31	5.39	4.37	13.61	4.17
Other	82.26	61.42	81.54	89.63	83.25	100.00	88.46
	2.69	10.88	4.98	6.49	7.29	0.00	5.41
ncome							
Less than \$2,500	88.86	80.73	85.04	89.72	100.00	100.00	86.36
	2.16	7.67	6.52	4.98	0.00	0.00	9.02
\$2,500 - \$4,999	82.90	74.53	82.47	88.34	82.73	100.00	87.67
	3.14	7.91	4.28	5.70	10.13	0.00	11.65
\$5,000 - \$7,499	87.08	68.39	89.32	91.94	91.44	65.05	84.83
	1.10	4.26	1.03	2.29	3.93	34.46	4.51
\$7,500 - \$9,999	86.71	73.95	91.10	90.23	90.33	85.62	85.91
	1.20	3.59	1.40	1.82	2.35	13.49	3.31
\$10,000 - \$14,999	86.38	78.24	88.99	88.34	88.35	93.10	84.76
	1.01	2.71	2.65	1.61	1.70	3.34	2.24
\$15,000 - \$19,999	88.82	87.30	93.08	90.17	87.50	94.48	87.81
	0.98	3.26	5.27	1.47	1.73	2.71	2.77
\$20,000 - \$24,999	88.99	84.23	100.00	90.13	87.24	92.55	91.27
	1.32	5.11	0.00	1.84	1.95	4.36	2.04
\$25,000 - \$29,999	90.57	84.08	100.00	89.47	89.92	92.64	94.15
	1.18	7.15	0.00	2.74	1.84	4.51	1.74
\$30,000 or more	88.34	75.49	94.64	88.59	88.56	94.97	87.66
	0.73	4.40	3.74	1.31	0.95	1.43	1.67

Table 3.5 Prescription Medicine User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1997 (3 of 4)

		Medicare		Supplemental H	ealth Insurance		
Beneficiary		Fee-for-Service		Individually-Purchased	Employer-Sponsored	Both Types of	Medicare
Characteristic	Total	Only	Medicaid	Private Insurance	Private Insurance	Private Insurance	HMO ²
			Percentage of Ber	neficiaries with at Least One	Prescribed Medicine	-	
All Beneficiaries	87.91	77.65	89.46	89.36	88.56	93.92	87.91
	0.42	1.38	0.83	0.77	0.55	1.06	0.96
Health Status							
Excellent	77.43	61.02	79.20	78.92	78.54	92.85	75.97
	1.28	5.40	3.85	2.27	2.03	2.97	2.66
Very good	84.78	67.07	82.95	86.04	85.94	89.99	87.15
	0.77	3.49	2.44	1.34	1.15	2.87	1.85
Good	90.54	83.63	89.65	92.68	90.61	97.94	89.75
	0.63	2.27	1.64	1.02	0.94	1.18	1.53
Fair	93.74	83.47	91.84	96.35	96.61	93.26	97.58
	0.57	1.99	1.28	0.76	0.83	3.61	0.89
Poor	94.07	83.74	95.13	95.45	96.90	100.00	98.08
	0.81	3.27	1.17	2.17	1.22	0.00	1.36
Functional Limitation							
None	84.72	71.67	85.86	86.08	85.63	91.65	84.82
	0.64	2.37	1.61	1.09	0.81	1.58	1.31
IADL only ⁴	91.67	83.22	89.15	94.63	93.24	100.00	92.88
	0.65	2.29	1.32	0.93	1.13	0.00	1.67
One to two ADLs ⁵	93.77	86.41	95.46	93.75	94.98	98.47	95.30
	0.62	2.13	1.20	1.17	1.38	1.42	1.67
Three to five ADLs	94.05	81.38	92.24	97.64	96.47	95.54	97.23
	0.99	5.88	1.47	0.94	1.47	4.46	1.44

Table 3.5 Prescription Medicine User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1997 (4 of 4)

		Medicare		Supplemental H	ealth Insurance		
Beneficiary		Fee-for-Service		Individually-Purchased	Employer-Sponsored	Both Types of	Medicare
Characteristic	Total	Only	Medicaid	Private Insurance	Private Insurance	Private Insurance	HMO ²
			Percentage of Be	eneficiaries with at Least One	Prescribed Medicine		
All Beneficiaries	87.91	77.65	89.46	89.36	88.56	93.92	87.91
	0.42	1.38	0.83	0.77	0.55	1.06	0.96
Metropolitan Area Resident							
Yes	88.08	76.53	89.60	90.54	87.96	94.94	88.34
	0.48	2.03	0.95	0.87	0.64	1.17	0.93
No	87.37	79.13	89.55	87.31	90.52	91.25	80.70
	0.83	1.57	1.71	1.47	1.02	2.17	6.23

Source: Medicare Current Beneficiary Survey, CY 1997 Cost and Use Public Use File.

¹ The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.

² HMO stands for Health Maintenance Organization.

³ Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of aged and disabled.

⁴ IADL stands for Instrumental Activity of Daily Living.

⁵ ADL stands for Activity of Daily Living.

Table 3.6 Facility User Rates for Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1997 (1 of 4)

		Medicare	Supplemental	l Health Insurance ²
Beneficiary		Fee-for-Service		
Characteristic	Total ¹	Only	Medicaid	Private Insurance
	Percentage of Be	neficiaries with at Least	: One Short- or Lo	ng-Term Facility Stay
All Beneficiaries	9.60	7.64	28.88	5.65
	0.29	0.60	1.01	0.30
Medicare Status ³				
Aged				
65 - 74 years	3.48	1.44	14.06	2.34
	0.26	0.44	1.50	0.25
75 - 84 years	11.58	13.00	40.88	6.96
	0.56	1.95	2.03	0.53
85 years and older	34.01	36.77	65.63	21.13
	0.98	3.82	1.96	1.40
Disabled				
Under 45 years	9.43	3.87	14.08	0.65
, , , , , , , , , , , , , , , , , , , ,	0.94	1.37	1.51	0.64
45 - 64 years	6.55	4.61	14.36	1.75
·	0.71	1.39	1.92	0.64
Gender				
Male	7.95	5.77	25.65	5.26
iviale	0.36	0.76	1.54	0.40
Female	10.89	10.08	30.63	5.96
Tomale	0.37	1.20	1.27	0.40
	0.07	1.20	1.27	0.70
Marital Status		0.07	00.01	2
Married	4.46	3.05	20.84	3.44
	0.24	0.76	1.70	0.25
Widowed	16.24	14.53	37.55	10.02
	0.60	1.60	1.67	0.69
Divorced/separated	7.93	4.95	16.04	4.57
	0.76	1.49	1.71	1.20
Never married	19.39	12.89	29.43	8.52
	1.23	2.08	1.93	1.79

Table 3.6 Facility User Rates for Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1997 (2 of 4)

		Medicare	Supplemental	Health Insurance ²
Beneficiary	T -1-11	Fee-for-Service	BA - diid	Debugte becomes
Characteristic	Total ¹	Only	Medicaid	Private Insurance
	Percentage of Be	eneficiaries with at Least	One Short- or Lor	ng-Term Facility Stay
All Beneficiaries	9.60	7.64	28.88	5.65
	0.29	0.60	1.01	0.30
Race/Ethnicity				
White non-Hispanic	10.12	9.06	39.51	5.90
·	0.33	0.77	1.39	0.32
Black non-Hispanic	8.82	3.21	16.48	3.68
	0.76	1.05	1.45	1.07
Hispanic	3.70	1.45	7.63	1.29
	0.55	1.07	1.26	0.78
Other	7.33	14.58	9.34	5.45
	1.51	5.87	2.30	2.90
Income				
Less than \$2,500	19.13	12.24	43.42	4.19
	2.81	5.49	6.23	2.31
\$2,500 - \$4,999	21.40	12.41	31.11	9.00
	2.01	4.30	3.47	3.46
\$5,000 - \$7,499	18.47	4.50	24.09	9.58
	0.86	1.67	1.17	1.50
\$7,500 - \$9,999	14.87	7.05	27.07	8.92
	0.79	1.37	1.64	1.15
\$10,000 - \$14,999	10.36	6.53	32.41	7.48
	0.67	1.39	3.20	0.66
\$15,000 - \$19,999	7.85	5.88	44.32	6.08
	0.64	1.58	5.80	0.71
\$20,000 - \$24,999	6.58	10.50	64.44	4.53
	0.76	3.32	9.45	0.69
\$25,000 - \$29,999	5.47	15.28	36.68	4.73
	0.65	4.61	12.07	0.60
\$30,000 or more	4.77	9.03	47.96	4.38
	0.41	2.56	8.31	0.45

Table 3.6 Facility User Rates for Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1997 (3 of 4)

		Medicare	Supplemental	Health Insurance ²
Beneficiary Characteristic	Total ¹	Fee-for-Service	Medicaid	Private Insurance
Characteristic	lotai	Only	Medicaid	Private insurance
	Percentage of Be	neficiaries with at Least	One Short- or Lor	ng-Term Facility Stay
All Beneficiaries	9.60	7.64	28.88	5.65
	0.29	0.60	1.01	0.30
Health Status				
Excellent	2.30	2.89	7.09	1.70
	0.35	1.28	1.90	0.40
Very good	3.34	2.35	14.58	2.21
	0.30	0.93	1.71	0.34
Good	8.76	9.51	28.27	4.70
	0.50	1.38	1.74	0.48
Fair	17.51	6.95	35.78	11.71
	0.81	1.23	1.73	0.96
Poor	22.20	14.67	33.48	17.68
	1.09	2.59	2.23	1.50
Functional Limitation				
None	1.46	1.07	3.03	1.39
	0.15	0.41	0.67	0.17
IADL only ⁴	6.26	5.35	11.46	4.42
	0.49	1.23	1.19	0.59
One to two ADLs ⁵	16.33	9.00	31.89	12.35
	0.95	2.14	2.15	1.11
Three to five ADLs	50.11	42.10	69.15	36.09
	1.53	4.61	2.02	2.29

Table 3.6 Facility User Rates for Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1997 (4 of 4)

		Medicare	Supplementa	l Health Insurance ²
Beneficiary		Fee-for-Service		
Characteristic	Total ¹	Only	Medicaid	Private Insurance
	Percentage of Ber	neficiaries with at Least	One Short- or Lo	ng-Term Facility Stay
All Beneficiaries	9.60	7.64	28.88	5.65
	0.29	0.60	1.01	0.30
Metropolitan Area Resident				
Yes	9.54	8.51	29.14	5.90
	0.32	0.82	1.29	0.34
No	9.89	6.17	28.50	5.07
	0.51	0.73	1.40	0.49

Source: Medicare Current Beneficiary Survey, CY 1997 Cost and Use Public Use File.

- 1 The 9.60 percent of Medicare beneficiaries with a facility stay differs from the 6.82 percent of Medicare beneficiaries who either resided full-year in a long-term care facility or part of the year in a long-term care facility, as shown in Table 1.1. User rates in this table include full-year community residents who had short-term facility stays (institutional events), primarily in skilled nursing facilities, that were reported either during a community interview or collected through Medicare claims data. The residence rates in Table 1.1 do not count such people as residing full- or part-year in a long-term care facility.
- 2 Beneficiaries enrolled in Medicare HMOs are not included in individual categories in the table, but are included in the total. Beneficiaries who were not eligible for Medicaid at any time during 1997, but who had individually-purchased private insurance, employer-sponsored private insurance, unknown purchaser for private insurance, or who were enrolled in a private HMO are included in the category *private insurance*.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of aged and disabled.
- 4 IADL stands for Instrumental Activity of Daily Living.
- 5 ADL stands for Activity of Daily Living.